



Bib Data Sheet


**UNITED STATES DEPARTMENT OF COMMERCE**  
**Patent and Trademark Office**

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 Washington, D.C. 20231

<b>SERIAL NUMBER</b> 09/542,602	<b>FILING DATE</b> 04/04/2000 <b>RULE</b> -	<b>CLASS</b> 709	<b>GROUP ART UNIT</b> 2756	<b>ATTORNEY DOCKET NO.</b> 044557.0015
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**APPLICANTS**  
 James J. Crow, Austin, TX ;  
 Dennis L. Parker, Leander, TX ;

**\*\* CONTINUING DATA \*\*\*\*\*** *Mon An*

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *Mon An*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\***  
**\*\* 06/12/2000**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>[Signature]</i> Initials	<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 3
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**ADDRESS**  
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 Austin, TX 78701

**TITLE**  
 Broadband service control network

<b>FILING FEE RECEIVED</b> 345	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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CONFIRMATION NO. 5339

<b>SERIAL NUMBER</b> 09/542,602	<b>FILING DATE</b> 04/04/2000 <b>RULE</b>	<b>CLASS</b> 709	<b>GROUP ART UNIT</b> 2141	<b>ATTORNEY DOCKET NO.</b> 044557.0015	
<b>APPLICANTS</b> James J. Crow, Austin, TX; Dennis L. Parker, Leander, TX;					
<b>** CONTINUING DATA *****</b>					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 06/12/2000</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>		<b>STATE OR COUNTRY</b> TX	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> D' Ann Naylor Rifai CAMPBELL STEPHENSON ASCOLESE, LLP 4807 Spicewood Springs Rd. Bldg. 4, Suite 201 Austin ,TX 78759					
<b>TITLE</b> Broadband service control network					
<b>FILING FEE RECEIVED</b> 345	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		